

(Under 37 CFR § 1.63; with Power of Attorney)

FLH File No. 450100-03166

My residence, post office address and citizenship are as stated below next to my name.

# SYSTEM FOR MANAGING DATA OBJECTS

X is attached hereto.

\_\_\_\_\_ was filed on \_\_\_\_\_ as Application Serial No. \_\_\_\_\_.

with amendment(s) through \_\_\_\_\_ (if applicable, give dates).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, Sec. 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s) [list additional applications on separate page]: Priority Claimed:

<u>Number:</u>	<u>Country:</u>	<u>Filed (Day/Month/Year):</u>	<u>Yes</u>	<u>No</u>
2000-121298	Japan	21 April 2000	X	

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code § 112, I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, Sec. 1.56, which became available between the filing date of the prior application and the national or PCT international filing date of this application:

Prior U.S. Application(s) [list additional applications on separate page]:

Appln. Ser. Number:      Filed (Day/Month/Year):      Status (patented, pending, abandoned):

I hereby appoint WILLIAM S. FROMMER, Registration No. 25,506, and DENNIS M. SMID, Registration No. 34,930 or their duly appointed associate, my attorneys, with full power of substitution and revocation, to prosecute this application, to make alterations and amendments therein, to file continuation and divisional applications thereof, to receive the Patent, and to transact all business in the Patent and Trademark Office and in the Courts in connection therewith, and specify that all communications about the application are to be directed to the following correspondence address:

WILLIAM S. FROMMER, Esq.  
c/o FROMMER LAWRENCE & HAUG LLP  
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Direct all telephone calls to:  
(212) 588-0800  
to the attention of:  
WILLIAM S. FROMMER

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

INVENTOR(S):

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Full name of sole or first inventor: Eduardo Agosto SCIAMMARELLA

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Citizenship: U.S.A

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Citizenship: Japan

[Similarly list additional inventors on separate page]

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[if all inventors have the same post office address]

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Note: In order to qualify for reduced fees available to Small Entities, each inventor and any other individual or entity having rights to the invention must also sign an appropriate separate "Verified Statement (Declaration) Claiming [or Supporting a Claim by Another for] Small Entity Status" form [e.g. for Independent Inventor, Small Business Concern, Nonprofit Organization, individual Non-Inventor].

Note: A post office address must be provided for each inventor.

ADDITIONAL INVENTORS

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Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
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Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
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Signature: \_\_\_\_\_  
 Full name of 8th joint inventor (if any):  
 Residence:  
 Citizenship: